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FACSIMILE TRANSMITTAL FORM

Group Art Unit 3738
TO: Examiner Javier J. Blanco DATE: April 5, 2007

COMPANY: United States Patent and Trademark Office

FACSIMILE NO.: 571-273-8300

FROM: Charles W. Agnew NO. OF PAGES 6
(including this cover sheet).

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RESPONSE UNDER 37 CFR 1.116
- EXPEDITED PROCEDURE -
EXAMINING GROUP 3738

In Re Application of: Joseph F. Obermiller

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Atty. Docket No.: PA-5213-CIP-CON

Serial No.: 10/721,582

Group Art Unit: 3738

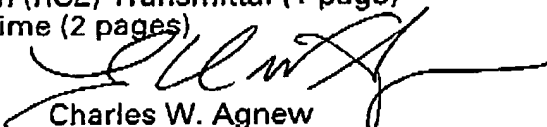
Filed: November 25, 2003

Examiner: Javier G. Blanco

Title: IMPLANTABLE VASCULAR DEVICE

Please enter and make of record the enclosed amendment to application Serial No. 10/721,582. The following documents are enclosed with this transmission:

Transmittal letter (2 pages)
Request for Continued Examination (RCE) Transmittal (1 page)
Petition and Fee for Extension of Time (2 pages)


Charles W. Agnew
Registration No. 44,497
(812) 330-1824

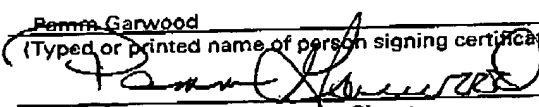
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Serial No. 10/721,582

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I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being facsimile transmitted to the Patent and Trademark Office on the date shown below.	
<u>April 5, 2007</u> Date	<u>Pamela Garwood</u> (Typed or printed name of person signing certification)  Signature

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of: Joseph F. Obermiller

Atty. Docket No.: PA-5213-CIP-CON

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- EXPEDITED PROCEDURE -
EXAMINING GROUP 3738

MAIL STOP RCE
COMMISSIONER FOR PATENTS
ALEXANDRIA, VA 22313

TRANSMITTAL OF AMENDMENT AND RESPONSE

SIR:

Please make of record the following papers relating to the above-identified application:

Request for Continued Examination (RCE) Transmittal (1 page)
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Page 1 of 2

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Serial No. 10/721,582

PATENT

FEE FOR CLAIMS

	Claims Remaining After Amendment	Highest Number Previously Paid For	No. Extra	Rate	Calculations
Total No. of Claims	13	20	0	x \$ 50 =	\$ 0.00
Independent Claims	6	6		x \$200 =	\$ 0.00
Multiple Dependent Claim(s), if applicable				+ \$360 =	N/A
				TOTAL FEE:	\$ 0.00


The Commissioner is authorized to charge our Deposit Account No. 13-2528 in the amount \$790.00 for the Request for Continued Examination (RCE) fee, and \$120.00 for the fee for one-month extension of time. In the event of improper payment of a required fee, the Commissioner is authorized to charge or to credit Deposit Account No. 13-2528 as required to correct the error.

Please address all correspondence to:

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Respectfully,

Date: April 5, 2007


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